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CONFIRMATION NO. 7766

<b>SERIAL NUMBER</b> 10/828,892	<b>FILING OR 371(c) DATE</b> 04/20/2004 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1634	<b>ATTORNEY DOCKET NO.</b> 10031033-1
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## APPLICANTS

Michael T. Barrett, Mountain View, CA;  
 Alicia F. Scheffer, Redwood City, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

— None — *KDS*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

— None — *KDS*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

06/26/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 33	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>KDS</i> Initials				

## ADDRESS

022878

## TITLE

Methods and compositions for assessing chromosome copy number

<b>FILING FEE RECEIVED</b> 1004	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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